

CIA INTERNAL USE ONLY
SECRET

(When Filled In)

PERSONALITY (201) FILE REQUEST

TO RI/ANALYSIS SECTION		DATE 12/5/58	ACTION <input checked="" type="checkbox"/> OPEN <input type="checkbox"/> AMEND <input type="checkbox"/> CLOSE		
FROM <i>[Signature]</i>		ROOM NO. 2211 K	TELEPHONE 528		
<p>INSTRUCTIONS: Form must be typed or printed in block letters.</p> <p>SECTION I: List 201 number, name and identifying data in the spaces provided. All known aliases and variants (including maiden name, if applicable) must be listed. If the identifying data varies with the alias used, a separate form must be used. Write UNKNOWN for items you are unable to complete.</p> <p>SECTION II: List cryptonym or pseudonym, if assigned. If true name is sensitive, obtain 201 number from 201 Control Desk and complete Section I and Section III. On a separate form, enter the 201 number and complete Section II and Section III. Submit each form separately.</p> <p>SECTION III: To be completed in all cases.</p>					
SECTION I					
SENSITIVE		1. SOURCE DOCUMENT			
NON-SENSITIVE					
NAME (Last)	(First)	(Middle)	(Title)	SEX	3.
BOETTCHER	Otto			<input checked="" type="checkbox"/> M	
NAME VARIANT					
TYPE NAME 2	(Last)	(First)	(Middle)	(Title)	
PHOTO	4. BIRTH DATE	5. COUNTRY OF BIRTH	6. CITY OR TOWN OF BIRTH	7. OTHER IDENTIFICATION	
<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	30-11-05	GERM	1. DR <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/>	
OCCUPATION/POSITION Being considered BfV employment, Düsseldorf - Westfalen					
SECTION II					
CRYPTONYM	PSEUDONYM				
SECTION III					
COUNTRY OF RESIDENCE W GER	10. ACTION DESK EE/G/L	11. 2ND COUNTRY INTEREST	12. 3RD COUNTRY INTEREST	12A.	
COMMENTS: <i>CIT: West Germany</i>					
DECLASSIFIED AND RELEASED BY CENTRAL INTELLIGENCE AGENCY SOURCES/METHODS/EXEMPTION 3B2B NAZI WAR CRIMES DISCLOSURE ACT DATE 2006					
PERMANENT CHARGE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		RESTRICTED FILE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	SIGNATURE <i>[Signature]</i>		